



Clinical Psychology Postdoctoral Fellowship
Durham VA Medical Center
2023-2024

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OVERVIEW

Welcome

Greetings! We are glad you are considering the Durham VA for your psychology postdoctoral training experience. We hope this brochure answers all your questions but please do not hesitate to reach out to the training director, Dr. Carolina Clancy (carolina.clancy@va.gov), if you have any questions or would like additional information.

COVID-19 Impact on Training

Although we have faced many challenges since the beginning of the pandemic, our dedication to high-quality clinical care and psychology training has never been stronger. Clinical training opportunities have remained largely the same as before the pandemic, with many of our therapies being delivered in a telehealth format. Our postdoctoral Fellows are currently on site a minimum of 2 days per week and telework the remaining days. Our Fellows follow safety procedures consistent with CDC and local facility guidelines, including screening requirements, mandatory masking and PPE requirements, social distancing, cleaning protocols, and hand washing. Supervision remains consistent with APA accreditation guidelines (minimum of two hours per week for the Fellowship Program) and takes place in person or virtually (typically via Microsoft Teams). Currently, all didactics and team meetings take place remotely.

With COVID, much remains uncertain locally and nationally so we cannot fully predict whether service delivery and clinical opportunities within each focus area will change for the 2023/2024 training year. However, we currently do not anticipate any significant changes to either our clinical services or populations served within each focus area. We do anticipate that the current practice of primarily using telehealth will continue for the foreseeable future. We will update our training materials as the situation evolves and plan to share any new information during our February virtual interview process. Dr. Clancy, the fellowship Training director, welcomes any questions that may address any concerns or questions regarding our COVID-19 modifications.

Program Aims

The overall aim of the Durham VA Medical Center Clinical Psychology Fellowship program is to develop psychologists into outstanding scientist-practitioners and leaders in mental health care, research, and education. Our program prepares Fellows for advanced-level practice and

leadership roles in psychology through comprehensive, interdisciplinary, specialist clinical and research training. It is expected that Fellows will become licensed and will be well-prepared to assume roles as mental health leaders in academic psychology and the VA healthcare system. A second aim of the program is to prepare Fellows for advanced level practice in a high priority area of health care for Veterans (e.g., PCMH-Behavioral Medicine, Psychosocial Rehabilitation, Trauma Recovery, Women's Health and Geropsychology).

Training Model & Philosophy of Supervision

Our program follows the scientist-practitioner philosophy of education and training. We strongly encourage and support the use of scientific literature to inform clinical practice and emphasize empirically based psychotherapies (EBPs) in our training. Further, we take a developmental approach to training. Competencies in professional practice are developed through graduated experiential learning, supervision, didactic training, and mentorship. Delivery of patient care is balanced with the post-doctoral educational mission; and, as junior colleagues, Fellows play an important role in selecting their own training opportunities and developing training plans to meet their specific needs.

Multicultural competence is integral to the mission of our training program at the Durham VA. We recognize the importance of acknowledging and supporting individual differences in our trainees, and within relationships between our trainees, staff, and patients. We work to identify, respect, and nurture the unique personal attributes that an individual brings to each relationship. We believe that fostering a culturally rich and diverse training environment is foundational to a strong training program and to nurturing professional psychologists capable of providing culturally competent, patient centered care. To that end, we promote awareness of, and sensitivity to, individual and cultural diversity identities across multiple settings during the training year through discussions during supervision, seminars, and workshops.

Fellowship Program Competencies

The program is broad and offers a variety of research, educational, and clinical experiences with the flexibility to ensure that the individual interests and training needs of Fellows are met. Training has sufficient breadth to ensure advanced competence in professional psychology and sufficient depth to ensure that Fellows will graduate with professional and technical expertise in their chosen specialty research and practice area. The program requires all Fellows to

demonstrate an advanced level of professional competency, skill, and proficiency in the following content areas:

To develop advanced-level competencies in Science and Practice Integration: Fellows will advance their knowledge and ability to integrate and disseminate their knowledge of research and other scholarly activity.

To develop advanced-level competencies in Individual and Cultural Diversity: Fellows will further develop their awareness and appreciation of cultural and individual differences and will both attain and display their cultural competence in all aspects of their work.

To develop advanced-level competencies in Ethical, professional, and Legal Issues: Fellows will become appropriately familiar with the wide array of ethical and legal issues pertinent to the proper conduct of clinical psychology and human subjects related research, and display good knowledge of the relevant laws, rules, regulation, and policies pertaining to health service psychology. Fellows will conduct themselves in an ethical manner in all of their training and clinical activities.

To develop advanced-level competencies in Assessment and Intervention: Fellows will develop advanced competencies in the use of empirically derived treatments and empirically supported means of psycho-diagnostic evaluation of patients. Through increasingly independent provision of services, Fellows will display these competencies with more complex and challenging cases.

To develop advanced-level competencies in Supervision and Teaching: Fellows will gain advanced skills and knowledge in the supervision of psychology trainees including interns and/or practicum students through supervised experience and didactic training.

To develop advanced-level competencies in Consultation and Interprofessional/Interdisciplinary Skills: Fellows will gain advanced skills in delivering consultation to inter-professional teams and gain experience providing psychoeducation to providers.

To develop advanced-level competencies in Professional Values, Attitudes, and Behaviors: Fellows will further their competencies in professional and collegial conduct consistent with the APA Ethical Principles of Psychologists and Code of Conduct.

To develop advanced-level competencies in Communication and Interpersonal Skills: Fellows will gain advanced skills in managing difficult interactions and communications. They

will also develop skills in developing and maintaining effective collegial relationships with staff from all disciplines.

Facility and Training Resources

Durham VA Medical Center resources are numerous. Fellows will have access to a program called "Athens," which will allow literature searches on one's own computer. Books and professional articles can also be obtained via consultation with the librarian.

For days in which Fellows are working at the medical center, each Fellow has an individual or shared office equipped with an assigned computer, and has access to the networked hospital computer system, which in turn provides access to each patient's electronic medical record. Additional offices are available to psychology Fellows for provision of direct services, as needed to supplement the assigned office availability. Laptops, as well as additional equipment needed for teleworking (e.g., second monitors, keyboards, etc.), will also be available to the Fellow during the training year.

Fellows will also have access to funds to purchase licensure study materials or travel to conferences. The amount varies each year and is established by the Education office.

In the course of a year, the Durham VAMC currently provides training opportunities to approximately 1,900 residents and other trainees (i.e., Physician, Dental, Nursing and Associated Health trainees, such as psychology interns and postdoctoral Fellows). The primary academic affiliation with Duke University is only one of the numerous affiliation agreements for training of professionals.

DIVERSITY TRAINING

Our program is predicated on the idea that increased self-awareness and appreciation for other worldviews and cultures makes psychologists more effective clinicians, consultants, researchers, educators, and advocates. We believe that diversity among departmental members strengthens our staff, stimulates creativity, promotes the exchange of ideas, and allows us to provide more sensitive and effective patient care. Diversity, equity, and inclusion permeate and inform all training, policies, and practices of the Fellowship Training Program. While we have required didactics, we aim to infuse individual and cultural diversity into every aspect of our curricula. Durham is a richly diverse city, home to a greater makeup of ethnic minority groups than any of the five largest cities in North Carolina. Durham is also home to a large and thriving **LGBTQ+** community and was named the **Most Tolerant City in the US** in 2012 by The Daily Beast. Of note, our facility is listed in the Health Care Equality Index as a leader in LGBT healthcare.

Belonging, Representation, Equity, Accountability, and Learning Initiative

Our Belonging, Representation, Equity, Accountability, and Learning (B-REAL) Initiative (previously known as the Diversity Steering Committee), started in 2009 and has the goal of increasing awareness and knowledge about individual and cultural diversity, equity, and inclusion among staff and trainees. The B-REAL initiative promotes open dialogue about issues of culture and diversity while promoting the safety, well-being, and success of all within our department and the larger VA system. Psychology Trainees are welcomed and encouraged to participate in our B-REAL monthly meetings, which take place on the third Tuesday of the month from 10:00-11:00am.

Diversity Lunch and Learn Seminar Series

The Lunch and Learns series is designed as a space for post-doctoral fellows to develop skills in facilitating discussions on an area of interest within the broader domain of diversity, equity, and inclusion. Discussions are meant to be approached without any assumed expertise on the part of the fellow or staff facilitators and will not be evaluated in any formal manner by attendees. Articles, chapters, movies, podcasts, and TED Talks are commonly used to supplement discussion and learning.

Diversity Roundtable

The Diversity Roundtable is a communitarian, experiential, and process-oriented forum on diversity, equity, inclusion and belonging. This monthly workshop is attended by psychology staff and trainees, facilitated by Dr. Craig Libman. Previous psychology trainees have been instrumental in advancing and refining programming for the Roundtable. The Diversity Roundtable aims to challenge white supremacy, patriarchy, and prevailing social hierarchies, and promote racial, ethnic, gender, class, and age/ability equity and inclusion. This forum serves as an open, nonjudgmental space for the psychology department to continually explore and advance their culturally responsive practice and awareness of multicultural and social justice issues.

Diversity Mentorship Program

The Diversity Mentoring Program was designed to enhance the training experience of psychology trainees. We believe that attention to individual differences and diversity is vital to the development of competent psychologists. The purpose and goals of the diversity mentoring program include (1) providing psychology trainees the opportunity to discuss diversity-related experiences with someone who is supportive and not in an evaluative role for the trainee, (2) to develop a mentoring relationship with someone who is not a direct supervisor of the trainee's clinical work, and who can offer guidance and support in navigating diversity-related experiences during the training year, and (3) to support the development of psychology trainees both personally and professionally, particularly as it relates to issues surrounding diversity. Aspects of the diversity mentoring program, the professional development mentoring program, and the research mentoring program may at times overlap. However, the diversity mentoring program is an optional experience for trainees designed to facilitate discussions specifically related to issues of diversity, equity, and inclusion as relevant to the Fellow's professional identity and development. Mentoring meetings may include such activities as discussion of recent diversity related interactions (e.g., interactions with staff, Veterans, colleagues), discussion of topics related to diversity, discussion of professional development issues related to diversity, and review of journal articles or other literature related to a diversity topic of interest.

Diversity Newsletter

The Diversity Newsletter is designed as a collaborative space for psychology trainees to advocate and foster awareness and knowledge about a wide range of topics related to individual and cultural diversity, equity, and inclusion. The Diversity Newsletter is shared with

the Psychology Service line 3-4 times per year and participating is optional for psychology trainees.

Land Acknowledgement

The Durham VA Psychology Fellowship Program acknowledges that the lands our facilities occupy are the ancestral lands of the Shakori, Lumbee, Eno, Moratok, Neusiok, and Tuscarora people. Today, North Carolina recognizes 8 tribes: Coharie, Lumbee, Meherrin, Occaneechi Saponi, Haliwa Saponi, Waccamaw Siouan, Sappony, and the Eastern Band of Cherokee. We recognize those peoples for whom these were ancestral lands as well as the many Indigenous people who live and work in the region today.

Accreditation Status

The Clinical Psychology Postdoctoral Fellowship program at the Durham VA Medical Center is accredited by the Commission on Accreditation of the American Psychological Association (APA). The most recent site visit took place in June 2021 and the next site visit is scheduled to take place in 2031. The Postdoctoral Fellowship is also a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC). Finally, the PCMHI-Behavioral Medicine Focus Area is accredited by the Society of Behavioral Sleep Medicine, which provides eligibility for taking the certification exam (Diplomate in Behavioral Sleep Medicine).

Any questions regarding the accreditation status of the Durham VAMC Clinical Psychology Postdoctoral Fellowship program may be addressed to the Commission on Accreditation (CoA):

Office of Program Consultation and Accreditation
Education Directorate
American Psychological Association
750 First Street NE
Washington, D.C. 20002-4242
202-336-5979
www.apa.org/ed/accreditation

PROGRAM STRUCTURE

There are eight Fellowship positions across five focus areas ("tracks"): **Trauma Recovery & OOO Mental Health, Women's Health- Trauma & DBT, Primary Care Mental Health Integration/Behavioral Medicine, Psychosocial Rehabilitation, and Geropsychology.**

Across all focus areas the Fellowship emphasizes clinical training and education (approximately 80%) and includes a research component (approximately 15-20%).

Positions Available:

- Trauma Recovery & OOO Mental Health: 2 fellows
- Women's Health-Trauma & DBT: 1 fellow
- Primary Care Mental Health Integration/Behavioral Medicine (PCMHI/Behavioral Medicine): 2 fellows
- Psychosocial Rehabilitation (PSR): 2 fellows
- Geropsychology: 1 fellow

Core Training Experiences Across Focus Areas

The Fellowship program is organized to ensure that all education and training activities are programmatic in their methods and content and are graduated in complexity. All Fellows will participate in a core set of training activities to ensure they meet competency criteria.

1. **Evidence-based mental health practice.** Fellows spend approximately 80% of their time in clinical training in their specialty area, which will serve to enhance their clinical skills, inform their research activities, and facilitate the translation of research to practice. Fellows will demonstrate knowledge and an advanced level of skill in evidence-based practice. This includes demonstration of advanced skill in the ability to conduct reliable and valid clinical assessments, utilize healthcare informatics, develop individually tailored treatment plans, demonstrate effective working relationships with Veteran patients, implement effective interventions, and understand the influence of cultural and individual diversity in mental health treatment.
2. **Research and scholarly inquiry.** Fellows spend 15-20% of their time on research, provision of psychological services in a research context, and related educational activities. The Fellowship offers a variety of research experiences through the VISN-6 MIRECC, the Center for Health Services Research in Primary Care, and medical center psychology staff involved in various research activities. Strategies of scholarly inquiry and attitudes of life-long learning, professional responsibility, and responsiveness to changes in the field are modeled and taught. Fellows are expected to demonstrate the ability to critically evaluate research literature for scientific rigor, meaningfulness,

and relevance; the ability to apply theoretical and empirical literature to professional practice; and the ability to understand the factors that contribute to effective research, clinical practice, and supervision.

3. **Supervision:** An important aspect of the program is to prepare Fellows to become effective leaders, mentors, and supervisors in their chosen specialty area of mental health and practice and/or research. Fellows receive supervised experiential learning and didactic training in teaching and supervision.
4. **Interprofessional/Interdisciplinary consultation and communication:** It is expected that Fellows will demonstrate advanced-level competence in the ability to effectively communicate with patients, families, and professionals including inter-professional teams and demonstrate the ability to effectively communicate to groups of professionals about their clinical practice and/or research.
5. **Professional conduct, ethics, and legal issues:** Fellows receive supervision and didactic training in professional conduct and ethics and relevant regulations and laws pertaining to research and clinical practice. Fellows will demonstrate advanced-level understanding of the legal and ethical issues involved in human subject research, and the legal and ethical issues involved in the provision of mental health services.
6. **Issues of cultural and individual diversity.** Training on issues of cultural and individual diversity that are relevant to each of the above training areas is implemented through required attendance of seminars, modeling, and supervision. As a postdoctoral Fellow, demonstration of increasing independence and self-reflective practice will include awareness, knowledge, and sensitivity to cultural and the wide range of individual factors in working with diverse clients.

TRAUMA RECOVERY-OOO MENTAL HEALTH

Focus Area Coordinators:

Trauma Recovery Program Coordinator:

Rachel Ruffin, Ph.D.

Staff Psychologist & Director, Trauma Recovery Program

Telephone: 919.286.0411 x177064

Email: rachel.ruffin@va.gov

OOO MH BHIP Coordinator:

Lotus Meshreki, Ph.D.,

Staff Psychologist & Director OOO Clinic

Telephone

Email: lotus.meshreki@va.gov

Location: Hillandale II Clinic (1830 Hillandale Road)

Number of Fellows: Two full-time positions

Trauma Recovery Program Supervisors: Kate Berlin, Ph.D., ABPP, Carolina Clancy, Ph.D., ABPP, Jay Gregg, Ph.D., Rachel Ruffin, Ph.D., & Annie Steel, Ph.D.

OOO MH BHIP Supervisors: Jay Gregg, Ph.D., Rachel Hibberd, Ph.D., & Lotus Meshreki, Ph.D.

Trauma Recovery Program and OOO MH BHIP training experiences: Fellows split their time evenly between the Trauma Recovery Program (TRP) & the OOO MH BHIP clinic. The TRP is a specialty outpatient program focused on treating PTSD and trauma related disorders. It is comprised of an interdisciplinary team including Psychology, Psychiatry, Social Work, Chaplain services and Nursing. While in the TRP, fellows provide treatment to Veterans of all gender identities and service eras, including male veterans with a history of Military Sexual Trauma (MST). Fellows will have the opportunity to gain specialized training in a wide range of empirically supported treatments such as individual Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), and Written Exposure Therapy (WET). Additionally, Fellows may co-facilitate a variety of empirically supported treatment groups including CPT as well as Cognitive Behavioral Therapy for Insomnia (CBT-I), Imagery Rehearsal Therapy (IRT) or Exposure, Relaxation, and Rescripting Therapy (ERRT) for nightmares, and Acceptance and Commitment Therapy (ACT) for experiential avoidance. Fellows interested in developing skills in trauma-

focused couples' therapy may also pursue training in Cognitive Behavioral Conjoint therapy for PTSD (CBCT-PTSD). Lastly, Fellows who are not familiar with the CAPS, will have the option to learn and administer the Clinician Administered PTSD-Scale (CAPS). All service eras are served by the Trauma Recovery Program, therefore Fellows may have an opportunity to gain specialty experience with populations of interest, such as geriatric Veterans with comorbid medical and cognitive difficulties. Fellows will have the opportunity to supervise Psychology Interns and potentially practicum students (depending on timing of students' rotations) and will be expected to co-facilitate several interdisciplinary team meetings throughout the year.

Post 9/11 Program: Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn (OOO) Mental Health (MH) Behavioral Health Interdisciplinary Program (BHIP):

The Post 9/11 Program includes three arms: Post 9/11 Military2VA (M2VA) Case Management Program, OOO MH BHIP, and Polytrauma. The Post 9/11 program consists of a multidisciplinary team (Psychology, Psychiatry, Nursing, Social Work and Nurse Case Managers, Neuropsychological Assessment, Speech-Pathology, Chaplain, and Occupational Therapy) devoted to comprehensive care of Veterans who served post 9/11 in a theater of combat operation and received imminent danger hazardous duty pay. Fellows will provide empirically supported treatments for common post-deployment concerns such as PTSD, depression, and anxiety disorders. OOO Veterans typically exhibit complex presentations including multiple diagnoses (e.g., PTSD with comorbid depression and SUD), and treatment often includes accommodation for medical comorbidities and cognitive sequelae associated with mild Traumatic Brain Injury (TBI). Examples of empirically supported treatments offered include Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), Acceptance and Commitment Therapy (ACT), CBT for insomnia (CBT-I), and Cognitive Behavioral Therapy (CBT) or Unified Protocol (UP) for various anxiety and depressive disorders. IBCT (Integrative Behavioral Couples therapy) and Cognitive Behavioral Couple Therapy (CBCT) are also available within the clinic. Further, full-model Dialectical Behavioral Therapy (DBT) is offered within the clinic. Should Fellows elect to engage in training in this treatment model, they will be fully integrated into the DBT team, engaging in DBT consultation, providing individual DBT therapy, and co-facilitating DBT Skills groups.

A large proportion of the Veterans treated in the TRP and the OOO MH BHIP are from low socioeconomic backgrounds and/or from racial/ethnic minority groups. The TRP and OOO MH BHIP provide services for Veterans from diverse backgrounds and gender identities, incorporating diversity training into clinical work and trainee development.

Fellows from within this emphasis area have the option of completing the VA Prolonged Exposure Therapy Consultation Training Program through a Prolonged Exposure Therapy

“mini-rotation.” If selected within their training plan, Fellows will spend a portion of their time carrying individual PE cases and attending weekly group and individual consultation meetings. Upon completing the training requirements and accepting VA Staff Psychologist positions, Fellows are granted VA Provider Status in PE Therapy. Fellows will also have the option of completing the VA Cognitive Processing Therapy Consultation Training Program. Upon completing the training requirements and accepting VA Staff Psychologist positions, Fellows are granted VA Provider status in CPT.

The Fellows who have selected the Trauma Recovery Program & OOO MH BHIP emphasis area will spend approximately one day per week engaged in research. They may utilize two existing IRB-approved program evaluation datasets in the PTSD clinic (one involving psychotherapy outcomes and a second one containing PTSD psychodiagnostic data), though have the option to pursue other research and program evaluation projects during the Fellowship year.

Teaching Methods: The Trauma Recovery- OOO Mental Health focus area Fellows will be assigned a primary supervisor in both the TRP Clinic and the OOO MH BHIP for the first six months of the training year and will typically switch to a second supervisor for each rotation during the second six months. The Trauma Recovery Program supervisors and the OOO MH BHIP supervisors will collaborate with each other and with the Fellows to develop an individualized training plan. Supervision will include discussion of clinical cases, multidisciplinary consultation, vertical supervision of Fellows’ supervision of interns, and other professional development topics. Additionally, Fellows will participate in interdisciplinary team meetings in both clinics. Consultation within and across disciplines is expected and encouraged both formally via team meetings and informally. At the beginning of the training year, Fellows will learn about the various ongoing research activities at the Durham VAHCS.

Didactics: Fellows are provided with comprehensive trainings in both Cognitive Processing Therapy and Prolonged Exposure, as needed, at the beginning of the training year. The Durham VA Psychology Postdoctoral Program benefits from the presence of both CPT and PE consultants on staff. If indicated by a Fellow’s training plan, thorough case consultation for CPT and PE may be arranged. Many of our past Fellows have met criteria for VA Provider Status in CPT and PE by the end of their training year. Additional trainings at the beginning of the Fellowship year may be available for Dialectical Behavior Therapy (DBT), CAPS assessment, etc. as needed.

Throughout the training year, all Trauma Recovery Fellows participate in three required monthly didactics focused on the topic of trauma-related services, and will have access to additional, optional monthly didactics to participate in as their schedule allows.

- Trauma Recovery Journal Club – Required, Monthly, facilitated by Drs. Annie Steel and Jessica Kinsaul
- Trauma Recovery Research and Program Evaluation – Required, Monthly, facilitated by Dr. Eric Dedert and Dr. Kirsten Dillon
- Trauma Providers Meeting – Optional, Monthly, facilitated by Dr. Carolina Clancy

WOMEN'S MENTAL HEALTH – TRAUMA & DBT

Focus Area Coordinator:

Kelly Caron, Ph.D.

Staff Psychologist & Clinic Director, Women's Health – Mental Health Clinic

Telephone: 919.286.0411 x178091

Email: kelly.caron@va.gov

Locations:

Women's Health – Mental Health Clinic – Durham VA Medical Center, Main Building

Number of Fellows: One full-time position

Women's Health – Mental Health Clinic Supervisors: Kelly Caron, Ph.D. & Jessica Kinsaul, Ph.D.

Minor Rotation Supervisor(s): TBD; as minor rotation is tailored to trainee needs.

Overview: Clinical postdoctoral training Women's Mental Health-Trauma and DBT occurs primarily within the Women Veterans Comprehensive Health Center (Women's Health Clinic). Fellows spend three days per week providing mental health services to women, transgender, and non-binary Veterans who prefer to be seen in WHC. The Fellow will refine their understanding of the impact of military sexual trauma (MST) and other traumatic life experiences, including childhood sexual abuse, domestic violence, and combat on women Veteran's psychosocial functioning. The Fellow will assess and treat a variety of complex and co-morbid psychiatric disorders including PTSD, anxiety disorders, depression, substance use, eating disorders, and Borderline Personality Disorder. The Fellow will have the opportunity to refine their skills in several treatment modalities for these psychiatric disorders, such as PE, CPT, and the Cloitre model of treatment for complex PTSD (STAIR/NT). The Women's Health Clinic also houses a full-model Dialectical Behavior Therapy (DBT) program, within which the Fellow takes a primary role as individual therapist, group co-leader, skills coaching provider, and peer consultation team member. In addition to conducting intake evaluations and providing group and individual therapy, the Fellow will play an active role on the Women's Health – Mental Health interdisciplinary BHIP team and will consult and collaborate with other medical providers in the Women's Health Clinic. Finally, Fellows will train in the provision of supervision with psychology interns on rotation in the Women's Health – Mental Health Clinic.

The Veterans served in the Women's Health Clinic represent a wide range of culturally and individually diverse backgrounds. This includes women of varying ages from all eras, representing varying races and religions. Many of those served identify as sexual and/or gender minorities. The clinic treats Veterans who served for just a few months alongside those who retired as officers; those who are homeless or are otherwise of low SES and those with more financial stability. Additionally, the Women's Health-Mental Health team is staffed by a diverse group of predominantly female-identified providers. Sensitivity to diversity is of utmost importance in working with women Veterans. Dr. Caron serves as the Chair for the Interdisciplinary Transgender Care Team and the Women's Health fellow may participate in those monthly team meetings and conduct pre-hormone and pre-surgical evaluations for transgender- and non-binary-identified veterans. Periodically, additional LGBTQI+-affirming individual and group therapy training opportunities are available to interested Fellows.

The Women's Health Fellow will spend one day per week engaged in trauma-related research. Women's Health emphasis Fellows will arrange their research training around a core project in which they serve as the Project Coordinator of the DBT Program Evaluation Project. The Fellow will lead monthly meetings and coordinate data collection efforts across the full DBT Program. Fellows are asked to protect 3 hours per week for this role. Fellows will have the opportunity to work with common collaborators (e.g., Dr. Nathan Kimbrel who has several ongoing projects focused on NSSI or Dr. Eric Dedert who often works with Fellows on publications using Trauma Recovery Program data on psychotherapy outcomes and/or PTSD diagnostic evaluations) or to work on projects stemming from their dissertation.

If relevant for particular Women's Health Fellows, additional training experiences in teaching are available. Past Fellows have presented in-service trainings to interdisciplinary staff audiences as well as psychology interns on various topics, including Assessment of Borderline Personality Disorder, Feminist Therapy, Case Conceptualization using Acceptance and Commitment Therapy, Culturally Sensitive Care of LGBT Veterans, Military Sexual Trauma, and Male MST.

The Women's Health Fellow has the option to spend up to one day per week providing clinical services in other settings within the Durham VA Healthcare System. Previous Fellows have most often worked in the General Mental Health Clinic but have otherwise paired with supervisors in the Trauma Recovery Program, Health Psychology Clinic, and Women's Health Clinic to meet a broader array of training needs. Minor rotation opportunities will be tailored to aid the Fellow in meeting identified training goals and may vary depending on supervisor expertise/availability.

Teaching Methods: The Women's Health Fellow will be assigned a primary supervisor, Dr. Kelly Caron, to oversee Women's Health – Mental Health Clinic activities and to be responsible for the overall coordination of the Fellow's training experience. The Fellow will have a secondary supervisor, for all or part of the training year, to provide training in additional areas relevant to the fellow's training goals(e.g., within their Minor Rotation. Supervisors will collaborate in developing the training experiences to meet the specific needs of the Fellow and will provide clinical supervision. In addition to supervision of clinical cases, supervision will address methods of effective consultation within a medical center and with reference to the Fellow's particular interdisciplinary teams as well as vertical supervision for their supervision of psychology interns. Clinical consultation with other faculty is also readily available, both formally through regular clinical team meetings and informally.

Didactics: Women's Health Fellows are provided with comprehensive trainings on both Cognitive Processing Therapy and Prolonged Exposure, as needed, at the beginning of the training year, offered by CPT and PE trainers on staff. If indicated by a Fellow's training plan, thorough case supervision on CPT and PE may be arranged. Many of our past Fellows have met criteria for Provider Status in CPT at the close of their training year. In-depth trainings in DBT and Risk Assessment and Management are offered at the beginning of the training year as well. Additional up-front trainings may be available for other treatment modalities (e.g., Written Exposure Therapy), CAPS-5 assessment, etc. as needed.

Throughout the training year, Women Health Fellows participate in three required monthly didactics alongside the Trauma Recovery Fellows and have additional, optional monthly didactics to participate in as their schedule allows. This list does not include required interdisciplinary team meetings referenced above or didactics required for all Fellows listed in the didactics section of this brochure.

- Trauma Recovery Journal Club – Required, Monthly, facilitated by Drs. Annie Steel and Jessica Kinsaul
- Trauma Recovery Research and Program Evaluation – Required, Monthly, facilitated by Dr. Eric Dedert and Kirsten Dillon
- Trauma Providers Meeting – Optional, Monthly, facilitated by Dr. Carolina Clancy
- Military Sexual Trauma Call – Optional, Monthly, facilitated by National MST Team
- Women's Mental Health Teleconference – Optional, Monthly, facilitated by Dr. Jennifer Strauss, National Women's Health Program Manager

PCMHI/BEHAVIORAL MEDICINE

Focus Area Coordinators:

PCMHI

Ashlee Carter, Ph.D.

Staff Psychologist, Durham Primary Care Clinic (H2)

Telephone: 919.286.0411 X177485

Email: ashlee.carter@va.gov

Behavioral Medicine

Melanie K. Leggett, Ph.D., DBSM, FSBSM

Staff Psychologist, Behavioral Sleep Medicine Clinic (2D)

Telephone: 919.286.0411 x177025

Email: melanie.leggett@va.gov

Number of Fellows: Two full-time positions

Locations:

PCMHI: Durham VAMC; Hillandale I CBOC; Raleigh 1 CBOC; Clayton CBOC

Behavioral Medicine: Durham VAMC Psychology Clinic (2D)

PCMHI Supervisors: Jason Bonner, Ph.D., Ashlee Carter, Ph.D., Jenna Ellison, Ph.D., Cindy Greenlee, Ph.D., and Raha Sabet, Ph.D.

Behavioral Medicine Supervisors: Natalie Cross, Ph.D., Danielle Gagne, Ph.D., Melanie Leggett, Ph.D.

Overview: PCMHI / Behavioral Medicine Psychology Fellows will receive training in two uniquely related settings: primary care and specialty behavioral medicine clinics at the Durham VAMC and surrounding community-based outpatient clinics (CBOCs).

PCMHI: The Fellows will rotate every four months to three diverse primary care settings selected from these options: the Durham VAMC, the Hillandale I CBOC, and the Raleigh 1/Clayton CBOC. The PCMHI clinic is a co-located, collaborative, interdisciplinary mental health team comprised of Psychology, Psychiatry, Social Work, and Nursing that provides services in primary care clinics located throughout the Raleigh-Durham region. Fellows will spend two days per week co-located within their respective primary care clinics, providing clinical assessment (both scheduled and same-day “warm hand-offs”), treatment, and consultation services to each clinic’s respective patient-aligned care teams (PACT, comprised of a primary care provider, an RN, and an LPN). Typical PCMHI psychology services include consultation and collaboration with PACT members and other embedded specialty services (e.g., clinical

pharmacy, nutrition), assessment of general mental health and behavioral medicine-related issues, delivery of brief, evidence-based treatments including individual and group-based psychotherapy, and care coordination with specialized clinics (e.g., specialty mental health, neurology, etc.). Fellows will have the opportunity to co-facilitate or lead a variety of treatment groups targeting Health and Wellness (i.e., stress management), chronic pain, insomnia, and other unique medical cohorts (e.g., shared medical appointments for diabetes and congestive heart failure). PCMH Fellows will also have the opportunity to collaborate with other trainees and professionals from various disciplines including but not limited to occupational therapy, psychiatry, and nursing, etc.

Behavioral Medicine: Fellows will spend two days per week in the Behavioral Medicine rotation. Opportunities will focus on a wide range of behavioral medicine, with emphasis on behavioral sleep and health psychology. For Fellows who are interested in specializing in Behavioral Sleep Medicine, it should be noted that this focus area is accredited by the Society of Behavioral Sleep Medicine which provides eligibility for taking the certification exam (Diplomate in Behavioral Sleep Medicine). Fellows will receive 1000 hours of training in behavioral medicine (at least 50% in behavioral sleep medicine). Training experiences may include clinical sleep evaluations/report writing, CBT for insomnia, Imagery Rehearsal Therapy for nightmares, psychological/behavioral therapies to promote CPAP adherence, treatment of circadian rhythm sleep disorders, treatment of complex cases (e.g., multiple sleep/medical/psychiatric disorders), actigraphy, and adjunctive treatments for narcolepsy. Fellows are expected to develop facility with the International Classification of Sleep Disorders (ICSD-3), including in-depth knowledge of insomnia and circadian rhythm sleep disorders and competence in detecting symptoms of other sleep disorders.

The Health Psychology clinic offers experience in a wide range of training activities (specialty psychological evaluation and treatment) within a culturally diverse patient population. Fellows will have the opportunity to conduct individual intakes as well as individual and group psychotherapy with patients with a variety of medical concerns. Common referrals include chronic pain, adjustment to chronic illness or changes in functioning, distress about (unexplained) medical symptoms, medication adherence concerns, and behavioral health concerns (e.g., weight management). Possible group therapy experiences include CBT for Chronic Pain, ACT for Chronic Illness, MOVE! Weight Management, and Progressive Tinnitus Management. Fellows may have the opportunity to conduct a variety of pre-surgical evaluations, to include assessment of transplant, bariatric, and/or spinal cord stimulator candidacy as requested by the Veteran's specialty medical care team. Fellows may also have

the opportunity to provide assessment and intervention for perioperative pain management within the Transitional Pain Service.

Fellows may have opportunities to engage in the following activities: program development/implementation, research (outcome evaluation), supervision of psychology interns, and co-facilitation of interdisciplinary team meetings. Fellows will spend one day per week engaged in research. This may include program evaluation projects within PCMHI or behavioral medicine clinics. Possible BSM-related research opportunities include investigating sleep quality in a large registry database of Veterans, developing a project with other existing BSM datasets, or evaluating BSM clinic outcomes.

Teaching Methods: PCMHI / Behavioral Medicine Fellows will be assigned a primary supervisor in either the PCMHI clinic (Dr. Jason Bonner, Dr. Ashlee Carter, Dr. Jenna Ellison, Dr. Cindy Greenlee, or Dr. Raha Sabet) or in the Behavioral Medicine clinic (Dr. Danielle Gagne, Dr. Melanie Leggett). Selection of the primary supervisor will be done in collaboration with the Fellows to meet their individualized professional development goals for the Fellowship year. Within PCMHI, weekly supervision will be split among the two PCMHI Psychology supervisors, depending on which clinic the Fellow is assigned to at that time. This supervisor will change every 4 months when the Fellow changes primary care clinics. Weekly Behavioral Medicine supervision will also be provided throughout the year by the supervisors working in their respective clinics (Dr. Danielle Gagne & Dr. Melanie Leggett).

Supervision will include discussion of clinical cases, interdisciplinary consultation, vertical supervision of Fellows' supervision of interns, and other professional development topics. Additionally, Fellows will participate in interdisciplinary team meetings in both clinics. Consultation within and across disciplines is expected and encouraged both formally via team meetings and informally. At the beginning of the training year, Fellows will learn about the various ongoing research activities.

Didactics: PCMHI/Behavioral Medicine Fellows are provided with comprehensive trainings on Cognitive Behavioral Therapy for Insomnia (CBT-I) and other behavioral sleep medicine topics, as needed, throughout the training year. Dr. Leggett is a CBT-I consultant in the national EBP program. If indicated by a Fellow's training plan, thorough case supervision on CBT-I may be arranged.

Throughout the training year, PCMHI / Behavioral Medicine Fellows participate in two required monthly didactics shared with all postdoctoral psychology Fellows at DVAMC and required team meetings specific to Behavioral Sleep Medicine and Primary Care Mental Health Integration:

- Sleep Medicine Didactics and Sleep Team Case Conference – Required, Bi-Monthly, facilitated by Dr. Melanie Leggett and Dr. Christi Ulmer, joint meeting with Duke Medical Center
- Primary Care Mental Health Integration Providers Meeting – Required, Monthly, facilitated by Dr. Cindy Greenlee
- Duke Psychiatry Grand Rounds- Optional, Weekly, facilitated by Duke University Medical Center

PSYCHOSOCIAL REHABILITATION

Focus Area Coordinator:

J. Murray McNiel, Ph.D.

Staff Psychologist, Substance Use Disorders (SUD) Clinic, Stop Smoking Clinic

Telephone: 919.286.0411 x177777

Email: jesse.mcniel@va.gov

Locations (all at Hillandale II Clinic): Psychosocial Rehabilitation & Recovery Center (PRRC), Mental Health Intensive Case Management (MHICM) Clinic, & substance use disorders (SUD) Clinic

Number of Fellows: Two full-time positions

Psychology Supervisors: Dr. Sloan Alday provides supervision in the PRRC and MHICM and Dr. J. Murray McNiel provides supervision in the SUD clinic.

Overview: Fellows in the PSR focus area will be part of a training program focused on (1) the theory and practice of psychosocial rehabilitation for serious mental illness (SMI) and (2) the treatment of substance use disorders (SUDs). The program provides individualized, mentored clinical and research training. The curriculum is designed to educate Fellows on the use of comprehensive psychosocial rehabilitation approaches, evidence-based treatment for SUDs, and implementing change in mental health care settings. Fellows will work with Veterans with SMI (e.g., schizophrenia, schizoaffective disorder, bipolar disorder, major depression, PTSD) and SUDs (i.e., alcohol, drugs of abuse, tobacco). The purpose of the PSR Fellowship is to develop leaders with vision and knowledge, and who are committed to the transformation of health care systems to those that emphasize functional capability, rehabilitation, and recovery. Fellows will have primary clinical experiences in the Psychosocial Rehabilitation and Recovery Center (PRRC), the Mental Health Intensive Case Management program (MHICM—an Assertive Community Treatment model program), and the substance use disorders (SUD) Clinic. Fellows have the option—and are encouraged—to complete the formal evidence-based training program in Social Skills Training and depending on availability may have the option of further formal EBP training (e.g., Motivational Interviewing, Cognitive Processing Therapy). Additionally, didactics and clinical experiences are offered throughout the training year on a range of evidence-based practices (e.g., Wellness Recovery Action Planning, Illness Management and Recovery, tobacco cessation). Fellows receive significant training in both group and individual service delivery. Additionally, each Fellow has the opportunity to participate in two research projects. One is a group project that includes all PSR Fellows across

disciplines, and specifically it is an education dissemination project targeting a need within the medical system (e.g., enhancement of services for early episode psychosis, integration of Whole Health services). The current mentor for this project is Julia Browne, Ph.D. The second is an individual project mentored by a staff member either at the Durham VA or another academic setting, based on the fellow's interests.

The Veterans served in the core clinics (PRRC, MHICM, SUD Clinic) include individuals of varying ages from across eras, as well as representing varying races/ethnicities. Many individuals have a history of racial, socioeconomic, and/or other forms of discrimination and marginalization. Thus, this Fellowship involves working with many underserved individuals, resulting in the need for and the opportunity to provide rehabilitation-oriented services.

Structure of Fellowship: Fellows in the PSR focus area are in effect part of two Fellowship programs. They are part of the APA-accredited postdoctoral Fellowship program that this brochure describes. Additionally, they are part of the Interprofessional Fellowship Program in Psychosocial Rehabilitation and Recovery Oriented Services, with co-directors J. Murray McNiel, Ph.D., and Julie McCormick, LCSW.

Psychosocial Rehabilitation Rotation Descriptions (Fellows complete all three rotations):
Psychosocial Rehabilitation and Recovery Center (PRRC) (Supervisor: C. Sloan Alday, Ph.D.).

The PRRC is an outpatient program that is focused on the provision of psychosocial rehabilitation and recovery services to Veterans who have been diagnosed with a serious mental illness (e.g., schizophrenia, schizoaffective disorder, bipolar disorder, major depressive disorder, PTSD) and are experiencing significant functional impairment. PSR psychology Fellows serve as the PRRC primary provider for several Veterans, which typically includes meeting regularly with Veterans to identify and work towards recovery goals. Fellows also co-facilitate at least one PRRC group or class at all times, with group offerings changing every three months (i.e., Fellows will co-facilitate at least 4 PRRC groups over the course of the year). Previous groups led by Fellows have included Wise Minds (DBT Skills Group), Positive Living (Positive Psychology), CBT for Psychosis, ACT, Problem-Solving Therapy, and Social Skills Training. Fellows also have the potential opportunity to propose/facilitate new PRRC group offerings based on their interests and/or expertise. Additionally, Fellows may provide adjunctive services to other Veterans in PRRC (e.g., targeted psychotherapy, MI, psychological testing) based on Veterans' needs and Fellows' interests/skills. Finally, Fellows in PRRC will function as a member of an interprofessional treatment team and will attend weekly PRRC team meetings.

Mental Health Intensive Case Management (MHICM) (Supervisor: C. Sloan Alday, Ph.D.)

MHICM is an interdisciplinary program that uses a client-centered, community-based, intensive case management approach. MHICM services are reserved for those Veterans with the most serious and persistent mental health conditions, who frequently utilize inpatient psychiatric hospitalization to help them cope with their illness. PSR psychology Fellows serve as the MHICM primary provider for 1-2 Veterans, providing community-based psychological and support services. The MHICM team may also consult Fellows to provide adjunctive services to other Veterans who are served in MHICM (e.g., evidence-based psychotherapy, construction/implementation of behavioral plans, psychological testing, etc.). Additionally, the Fellow participates in ongoing interprofessional consultation with MHICM staff members, which includes participation in weekly team meetings.

Substance Use Disorders (SUD) (Supervisor: J. Murray McNiel, Ph.D.)

The SUD rotation involves providing outpatient services to Veterans diagnosed with substance use disorders. Many Veterans have comorbid disorders, including serious mental illness, providing the opportunity to assess and treat individuals with complex psychological profiles and to coordinate care with other clinics (e.g., PRRC, MHICM, PTSD Clinic). The Fellow functions as a member of an interprofessional outpatient SUD team. Assessment experiences include conducting evaluations in the SUD screening clinic, where the Fellow develops clinical interview skills needed to assess the nature and severity of SUDs as well as other psychological, social, and health problems. In terms of individual treatment, the Fellow typically provides individual psychotherapy to 4-6 Veterans at a given time. The Fellow also is involved with group treatment. Often, this includes a CBT-SUD group or a group for co-occurring SUD and SMI. Other groups with which Fellows have participated include relapse prevention, ACT-SUD, Emotion Coping and Seeking Safety. Overall, the SUD Clinic training experience emphasizes evidence-based treatments, drawing most strongly on cognitive-behavioral and motivational enhancement approaches. Among these is CBT-SUD, an evidence-based intervention that is part of the VA national EBP dissemination program. Additionally, Fellows may become involved in the tobacco cessation clinic. This clinic offers comprehensive treatment for stopping smoking or smokeless tobacco use, primarily in group format. Treatment includes motivational enhancement, cognitive-behavioral coping skills training, relapse prevention strategies, effective utilization of social support, and facilitation of pharmacotherapy (e.g., nicotine replacement therapy).

Rotation structure: Clinical time is divided equally among the rotations, although the distribution of that time varies by rotation. Specifically, each Fellow participates in the PRRC

rotation for the full year (i.e., one-third of the Fellow's clinical time throughout the year), whereas the MHICM and SUD rotations each last half the year (i.e., each is two-thirds of the Fellow's clinical time for the half of the year on the respective rotation, MHICM or SUD).

Teaching Methods: Each PSR Fellow will be assigned multiple primary supervisors, consistent with providing services for individuals in the two content areas of SMI (PRRC, MHICM) and SUD. Supervision will include discussion of clinical cases, interprofessional consultation, and the opportunity for vertical supervision of work conducted by other trainees (e.g., psychology intern, psychology practicum student). A particular emphasis of the Fellowship is its interprofessional structure. In addition to psychology, each PSR Fellowship cohort includes Fellows from several different disciplines (e.g., chaplaincy, occupational therapy, psychiatry, social work). Thus, a collaborative educational experience amongst the PSR Fellowship class is present. Additionally, each core clinic is served by an interprofessional team, and considerable engagement with these teams is integral to the training experience. Overall, this structure allows the psychology Fellow to both learn from other disciplines and demonstrate the role of one's own discipline, preparing the psychology Fellow for independent professional functioning.

Didactics: PSR Fellows are provided with trainings on rehabilitation and recovery from both SMI and SUD. These include a local Fellowship seminar series with presentations by experts both outside and within VA, as well as a monthly national seminar series by the PSR hub site. Additionally, note that Fellowship staff includes trainers and/or consultants on rollouts of VA evidence-based psychotherapies (e.g., Social Skills Training, CBT-SUD).

GEROPSYCHOLOGY

Geropsychology Focus Area Coordinator:

Rachel Rodriguez, Ph.D., MPH, ABPP-Gero

Staff Psychologist, Home-Based Primary Care

Telephone: 919.286.0411 x123920 or 919.548.5035

Email: Rachel.Rodriguez2@va.gov

Locations:

Community Living Center – Rehabilitation & Long-Term Care—Durham VA HCS, Main Building

Inpatient Hospice Care—Durham VA HCS, Main Building

Outpatient Palliative Care and Inpatient Consult/Liaison Services—Durham VA HCS, Main Building

Neuropsychology Clinic—Durham VA HCS, Main Building

Home Based Primary Care Program—Durham VA HCS, Capitola Campus, & Clayton/East Raleigh CBOC

Outpatient Mental Health- Late-Life PTSD Emphasis—Durham VA HCS, Hillandale II Clinic*

* Shuttle operates between Durham VA medical center and Hillandale Clinic site, ~10 minutes away

Number of Fellows: One full-time position

Supervisors: Jay Gregg, Ph.D., Craig Libman, Ph.D., Saule Kulubekova, Ph.D., ABPP-CN, Erin Piechocinski, PsyD., Rachel Rodriguez, Ph.D., MPH, ABPP-Gero, & Brea Salib, Ph.D.

Overview: The primary aims of the clinical geropsychology focus area include the development of general clinical and research competencies, as well as specialized competencies in geropsychology as outlined in the Pikes Peak Model for Training in Professional Geropsychology (Knight, Karel, Hinrichsen, Qualls, & Duffy, 2009). As such, training for the clinical geropsychology Fellow occurs across diverse clinical settings that serve aging Veterans and their families/support systems. Training experiences within the Durham VA Health Care System include outpatient mental health, rehabilitation, home care, long-term care, palliative, and hospice settings. Fellows receive advanced training in selecting, adapting, and implementing assessments and evidence-based interventions for older adults and their supports. Interdisciplinary teamwork and provision of consultation to other healthcare professionals are also emphasized across training settings.

At the outset of the training year, the Fellow will develop an individualized training plan with the focus area coordinator. The individualized training plan is based on the Fellow's training background, personal training goals, and areas of growth identified via completion of the Pikes Peak Competency Assessment Tool. Four days (32 hours) per week are devoted to clinical training and approximately one day (up to 8 hours) per week is devoted to geriatric research. Numerous research opportunities are available at the Durham VA HCS through the VISN 6 Mental Illness Research, Education, and Clinic Center (MIRECC), the Geriatric Research, Education, and Clinic Center (GRECC), and through our academic affiliation with the Duke University Medical Center.

Geropsychology Rotation Descriptions:

Community Living Center – Rehabilitation, & Long-Term Care

Supervisor: Ein Piechocinski, Psy.D.

The Short Stay/Rehabilitation Care Unit of the Community Living Center bridges the gap between hospital and home. The unit is designed for individuals who no longer need hospitalization in the acute care setting, but still require additional medical, nursing, rehabilitative, and/or supportive services that cannot be provided in the home. The goal is to assist patients to function more independently at home and in the community. Patient stays can range from weeks to months, with the average stay lasting 32 days. Patients admitted for rehabilitation typically present with comorbid psychiatric disorders (e.g., PTSD, mood disorders, cognitive disorders) and medical conditions (e.g., obesity, cancer, polytrauma, limb loss). The Fellow will conduct psychological assessments of emotional functioning and adjustment to disability following medical illness, diagnosis, or procedure (e.g., cancer diagnosis, amputation, organ transplant). Additionally, the Fellow will be trained to conduct capacity evaluations and more extensive neuropsychological testing to inform discharge planning. Psychology provides individual and group behavioral medicine interventions (e.g., CBT for insomnia and pain, motivational interviewing for compliance behaviors, weight loss, and tobacco cessation, motivational enhancement for substance use treatment initiation). Although evidence-based treatments such as ACT and CBT are routinely used in this setting, the Fellow will also provide short-term, problem-focused psychotherapy approaches including problem-solving skills training to address adjustment to the unit and communal living; distress tolerance skills training to manage negative emotions associated with health concerns; and crisis interventions. Fellows may also have the opportunity to provide therapy and assessment to long-term residents of the CLC based on clinical need.

Inpatient Hospice Care

Supervisor: Erin Piechoconski, PsyD. The Hospice Unit serves Veterans at end-of-life, experiencing complex pain or medical issues. Patients are admitted to the 12-bed Hospice Unit on permanent or short stays (the latter used primarily for acute symptom management and to relieve caregiver stress) and can leave and re-enter the program as needed. Common conditions include metastatic cancer, advanced heart failure, chronic lung diseases, end-stage liver and kidney disease, dementia, and progressive neurological diseases (e.g., ALS). Hospice aims to provide comfort care in the context of physical and psycho-social-spiritual suffering, offering comprehensive, interdisciplinary support to the patient and family at end-of-life. In particular, hospice includes a focus on life review, the dying process, and bereavement. Services are provided by an interdisciplinary team composed of members from medicine, nursing, OT, PT, social work, chaplaincy, psychology, and recreational therapy disciplines. The Fellow will be integrated into the Hospice interdisciplinary team that meets weekly. Psychological services commonly offered include cognitive and mood assessments and psychotherapeutic interventions (acceptance and commitment therapy, life review, psychoeducation, dignity/meaning-centered psychotherapies) to individuals, couples, and families to address grief, losses (e.g., role), and end-of-life issues. The Fellow has the opportunity to play an integral role in family meetings focused on goals of care on the hospice unit.

Outpatient Palliative Care and Inpatient Consult-Liaison Services

Supervisor: Craig Libman, PhD

The Palliative Care Consult Team serves Veterans with life-limiting and terminal illness. This patient population is diverse with respect to disease states, sociodemographic characteristics, mental health issues, and life experiences. Palliative Care is integrated into services throughout the hospital (e.g., medical units, hematology/oncology clinics, MICU, SICU) with outpatient services offered through face-to-face, video, and telephone services. Common conditions include metastatic cancer, advanced heart failure, chronic lung diseases, end-stage liver and kidney disease, dementia, and progressive neurological diseases (e.g., ALS). The goal of palliative care is to achieve the best possible quality of life for patients and their families. This goal is achieved through alleviating physical and psycho-social-spiritual suffering, enhancing quality of life, effectively managing symptoms, and offering comprehensive, interdisciplinary support to the patient and family throughout the course of illness regardless of stage of disease. Services are provided by an interdisciplinary team composed of members from medicine, social work, psychology, and chaplaincy. The Fellow will be integrated into the

Palliative Care Consult interdisciplinary team. Psychological services commonly offered include cognitive and mood assessments and psychotherapeutic interventions (cognitive-behavioral therapy, acceptance and commitment therapy, pain and sleep treatment, motivational interviewing, life review, psychoeducation, dignity/meaning-centered psychotherapies) to individuals, couples, and families to address grief, losses (e.g., role), and end-of-life issues.

Fellows on this rotation will also have the optional experience of working 4-8 hours/week with the consult/liaison psychiatry team, providing brief psychological assessment and psychotherapy to Veterans with acute mental health presentations (e.g., Major Depression, acute trauma symptoms, substance use, and SMI). Fellows who participate will also be able to participate in psychiatry rounds and case conferences with a team of psychiatrists, psychiatric physician assistants, and medical residents.

Neuropsychology

Supervisor: Saule Kulubekova, Ph.D., ABPP-CN

The Neuropsychology Clinic provides training in neuropsychological assessment in an outpatient setting. Referrals come from primary care, psychiatry, neurology, and other specialty clinics of the hospital. Common reasons for referral include concerns about neurocognitive and behavioral symptoms related to neurological, psychiatric, and other potentially contributing conditions and events (e.g., Alzheimer's disease, vascular dementia, Parkinson's disease, head trauma, stroke, epilepsy, multiple sclerosis, brain tumors, neurodevelopmental disorders, substance use, mood disorders, and others). Through didactic and experiential training, Fellows will develop skills in the following competency areas: diagnostic interviews and neurocognitive status exams; design of flexible test batteries to address referral questions; neuropsychological test administration, scoring, and interpretation; preparation of evaluation reports; development of recommendations; and provision of feedback to patients.

Home Based Primary Care

Supervisors: Rachel Rodriguez, Ph.D., MPH, ABPP-Gero & Brea Salib, Ph.D.

The Home-Based Primary Care (HBPC) program provides in-home primary medical care and psychosocial services for Veterans whose chronic medical conditions have made it difficult or impossible for them to access the outpatient clinics for the medical care they need. Veterans present with a wide array of chronic health conditions in various health stages from initial diagnosis to end-of-life concerns. The clinical geropsychology Fellow is a part of the HBPC

program interdisciplinary team, which includes medicine, occupational therapy, physical therapy, nursing, nutrition services, pharmacy, psychology, and social work. A wide variety of psychological services are provided to HBPC clients by the clinical geropsychology Fellow. These services include (but are not limited to): (1) psychological assessments of patients and caregivers, (2) cognitive and capacity evaluations, (3) individual and caregiver/family therapy for depression, anxiety, caregiver stress, and other forms of emotional distress, (4) training in basic pain, sleep, weight management and smoking cessation techniques, and (5) consultation with other program staff about methods of enhancing patient adherence to treatment regimens. Evidence-based psychotherapies are emphasized. Theoretical orientations utilized include cognitive, behavioral, and acceptance-based and mindfulness-based therapies.

Outpatient Mental Health - Late-Life PTSD Emphasis

Supervisor: Jay Gregg, Ph.D.

Fellowship training in outpatient geropsychology (with an emphasis on posttraumatic stress in late life) is available at the Durham VA HCS through the Trauma Recovery Program. Older adults (i.e., Vietnam, Korean, and World War II-era Veterans) are the largest cohort of Veterans currently seeking outpatient mental health care at the Durham VA PCT (and at outpatient clinics across VA more broadly). The clinical geropsychology Fellow is part of the interdisciplinary Trauma Recovery Team, which is comprised of psychology, social work, psychiatry, nursing, and chaplaincy. Evidence-based psychotherapies for PTSD and co-occurring psychological disorders are emphasized, including Prolonged Exposure (PE), Cognitive Processing Therapy (CPT), and Acceptance and Commitment Therapy (ACT). Fellows have the opportunity to deliver these evidence-based treatments in both individual and group modalities. Adaptation of EBTs based on assessment of physical and neurocognitive comorbidities often associated with aging is an integral part of training within this setting. Fellows may have the opportunity to develop and pilot their own group protocols based on their interest and background.

Teaching Methods:

The geropsychology Fellow will receive at least four hours of supervision weekly; two of these hours are one-on-one, scheduled supervision. Our program highly values direct observation; therefore, a portion of the Fellow's supervisee on will be directly observed or reviewed via audio or video recording. Supervision at the Fellowship level often includes discussion of clinical cases, interdisciplinary consultation, vertical supervision of the Fellow's supervision of interns, and a variety of other professional development topics (e.g., cultural/individual diversity, job search, administration). The geropsychology Fellow will also select a research

mentor/collaborator, and he/she/they is encouraged to collaborate with the research mentor and other staff/faculty within the Durham VA HCS Psychology Service, MIRECC, GRECC, and Duke University Medical Center.

Didactics:

Clinical geropsychology Fellows have access to a number of comprehensive trainings throughout the Fellowship year. The Fellow may elect to receive training in Staff Training in Assisted Living Facilities (STAR-VA). STAR-VA is an interdisciplinary, patient-centered approach to managing challenging dementia-related behaviors in VA CLCs. Additionally, the Durham VA is fortunate to have a very large number of VA Evidence-Based Psychotherapy (EBP) consultants and trainers; moreover, there are opportunities for both official EBP trainings (delivered by Durham staff) and consultation, as well as supports for pursuit of equivalency EBP provider status. Regional trainings in Cognitive Processing Therapy and Prolonged Exposure are available to the clinical geropsychology Fellow at the beginning of the training year. Fellows rotating through the PTSD Clinical Team may be able to meet criteria for provider status or equivalency in Cognitive Processing Therapy at the conclusion of the Fellowship year. Fellows can typically participate in an annual regional training for Motivational Interviewing. Finally, national trainings on a variety of topics (e.g., Acceptance and Commitment Therapy, Group Psychotherapy) are frequently held in the Durham and Raleigh areas, and the Fellow is encouraged to attend trainings that align with his/her interests and needs.

Throughout the training year, the clinical geropsychology Fellow participates in the following required monthly didactics: Ethics and Professional Development, and Clinical Supervision Seminar, and the Diversity Roundtable. In addition, the Fellow will participate in a Diversity Lunch and Learn series that occurs 8 times throughout the year. The Fellow also participates in a monthly journal club specifically held for clinical geropsychology staff and trainees. They also will have access to the following optional didactics as the Fellow's schedule allows:

- Durham VA HCS Interprofessional Grand Rounds – Monthly
- VA Multisite Geropsychology Postdoctoral Seminar-Weekly
- Meeting the Mental Health Needs of Aging Veterans: Research and Practice – Monthly
- VA GRECC Case Conference Series-Monthly
- Duke University Psychiatry Grand Rounds - Weekly
- VA Geriatric Scholars Webinar Series – Quarterly
- Duke Center for Aging and Human Development Geriatric Education Series-Monthly

DIDACTICS

The didactic experiences at the Durham VAMC are designed to support the clinical and research responsibilities of trainees. Fellows attend a minimum of 4 hours of didactic trainings per week. Fellows have four required didactics as well as a myriad of additional optional didactic training opportunities summarized in a table below.

Required Didactics and Trainings for all Fellows

Ethics and Professional Development Series: All Fellows participate in an Ethics and Professional Development seminar led by Drs. Jenna Ellison and Murray McNiel. This seminar is designed to address the various needs of Durham VAMC Psychology Postdoctoral Fellows in the areas of Ethics and Professional Development. Past topics include Reporting of abuse/neglect, ethical chart documentation, travel pay or disability claim conflicts, unethical behavior of/difficulties with colleagues, professional development, modifying vita from intern-level to postdoctoral-level, job search related topics, writing cover letters, the psychology licensure process, preparing for the EPPP and state exams, interviewing tips, and work/life balance. In the second half of the year, Fellows present on a relevant ethics topic of their choosing, using case examples, and lead discussion on resolution of ethical dilemmas therein.

Clinical Supervision Seminar: All Fellows participate in the Supervision Seminar led by Dr. Rachel Ruffin. This seminar is designed to address the various needs of Durham VAMC Psychology Postdoctoral Fellows in the area of Clinical Supervision. All psychology postdoctoral Fellows are expected to provide vertical supervision to psychology interns and/or practicum students during their postdoctoral year; this seminar will serve as a place for expanded learning, processing, and consultation. The text *Clinical Supervision: A Competency Based Approach*, by Carol Falender and Edward Shafranske (APA 2004), in conjunction with numerous peer-reviewed articles, are used to facilitate learning and discussion. Fellows review readings, as well as present clinical supervision cases and challenges. Each month, a Fellow takes the lead as the presenter of readings and clinically relevant case examples.

Diversity Lunch and Learn: This didactic is facilitated by various staff psychologists and psychology Fellows, meeting near monthly. Diversity Lunch and Learn Seminars are intended to provide protected time for in-depth discussions on a topic related to cultural diversity. Readings are typically assigned in advance, and then are integrated with case discussions. Pairs of Fellows co-lead this didactic twice throughout the year and are assigned a staff member to consult with as they prepare.

Diversity Roundtable: This didactic is facilitated by Dr. Craig Libman, meeting monthly. Staff and trainees attend on a regular basis to discuss a variety of topics related to cultural diversity. This meeting uses a variety of formats including journal discussion, semi-structured discussion, case discussions, invited speakers, experiential learning, etc. to facilitate growth in this domain.

Didactics & Consultation Meetings

<i>Topic</i>	<i>Frequency</i>	<i>Led by</i>	<i>Intended for</i>
<i>Ethics and Professional Development</i>	Monthly	Murray McNiel & Jenna Ellison	All Fellows (required)
<i>Clinical Supervision Seminar</i>	Monthly	Rachel Ruffin	All Fellows (required)
<i>Diversity Lunch and Learn Series</i>	Monthly	Rachel Rodriguez	All Fellows (required)
<i>Diversity Roundtable</i>	Monthly	Craig Libman	All Fellows (required)
<i>Risk Assessment & Management</i>	Once, in Fall	Kelly Caron & Sara Boeding	All Fellows (required)
<i>Prolonged Exposure Therapy</i>	Once, in Fall	Kate Berlin & Kelly Caron	Optional for all Fellows
<i>Cognitive Processing Therapy</i>	Once, in Fall	Carolina Clancy & Sara Tiegreen	Optional for all Fellows
<i>PTSD Journal Club</i>	Monthly	Annie Steel & Jessica Kinsaul	Trauma Recovery Fellows (required)
<i>Trauma Recovery Research and Program Evaluation Seminar</i>	Monthly	Eric Dedert & Kirsten Dillon	Trauma Recovery Fellows (required)
<i>Trauma Providers Meeting</i>	Monthly	Carolina Clancy	Trauma Recovery Fellows (optional)
<i>DBT Program Evaluation Meeting</i>	Monthly	Kelly Caron	Required for Fellows on the DBT Team
<i>OOO MH BHIP Group Consultation</i>	Weekly	Seamus Bhatt-Mackin, MD	Optional for Trauma Recovery Fellows
<i>OOO MH BHIP Program Team Meeting</i>	Weekly	Staff rotate	Optional for Fellows in TRP & Returning Veteran's Clinics

Topic	Frequency	Led by	Intended for
<i>Trauma Recovery Program Clinical Team Meeting</i>	Weekly	Staff and trainees rotate	Required for Trauma Recovery – TRP & Returning Veteran’s Clinic Fellows
<i>Women’s Health – Mental Health Team Meeting</i>	Weekly	Kelly Caron	Required for Trauma Recovery -Women’s Health Clinic Fellow
<i>DBT Peer Consultation Team</i>	Weekly	Jay Gregg	Required for Fellows training in DBT
<i>Dialectical Behavior Therapy Training</i>	Once, in Fall	Jay Gregg & Kelly Caron	Required for Fellows training in DBT; Optional for all other Fellows
<i>Psychosocial Rehabilitation Seminar Series</i>	Monthly	Murray McNiel & Julie McCormick, LCSW	Required for PSR Fellows
<i>PSR Cross Site Didactic Series</i>	Monthly	Richard Goldberg, MD	Required for PSR Fellows
<i>Psychosocial Rehabilitation and Recovery Providers Team Case Consultation Meetings</i>	3 hours weekly	Various Staff	Required for PSR Fellows
<i>Interprofessional Consultation for PSR</i>	Weekly	Murray McNiel & Julie McCormick, LCSW	Required for PSR Fellows
<i>Research and Education Dissemination Meeting</i>	Weekly	Led by PSR Program Staff	Required for PSR Fellows
<i>Social Skills Therapy Training</i>	Once	Allison Taylor	Required for PSR Fellows
<i>Review of PSR Services Series</i>	Monthly	PSR Faculty	Required for PSR Fellows
<i>PSR Fellowship Education Dissemination Meeting</i>	Weekly	PSR Faculty	Required for PSR Fellows
<i>PSR Fellowship Telehealth Meeting</i>	Weekly	PSR Faculty	Required for PSR Fellows
<i>PSR Psychology Group Supervision Meeting</i>	Weekly	PSR Faculty	Required for PSR Fellows
<i>PCMHI Providers Meeting</i>	Monthly	Cindy Greenlee	Required for PCMHI/BMed Fellows

<i>Topic</i>	<i>Frequency</i>	<i>Led by</i>	<i>Intended for</i>
<i>PCMHI Program Office Education Conference Call Series</i>	Monthly	National Meeting via Skype	Required for PCMHI/BMed Fellows
<i>Sleep Medicine Case Conference</i>	Twice Monthly	Duke & VA Sleep Providers	Required for PCMHI/BMed Fellows
<i>Sleep Medicine Didactics</i>	Twice Monthly	Duke & VA Sleep Providers	Required for PCMHI/BMed Fellows
<i>Geropsychology Journal Club</i>	Monthly	Staff rotate	Required for Geropsychology Fellow

POLICIES AND PROCEDURES

Health Professions Trainees (HPTs) are appointed as temporary employees of the Department of Veterans Affairs. As such, HPTs are subject to laws, policies, and guidelines posted for VA staff members. There are infrequent times in which this guidance can change during a training year which may create new requirements or responsibilities for HPTs. If policies change during a training year, HPTs will be notified as soon as possible. The Fellowship Training Director will provide you with the information you need to understand the requirement and reasons for the requirement in timely manner.

Due process and grievance procedures are available upon request from Dr. Carolina Clancy, Director of Training (carolina.clancy@va.gov).

In compliance with the Federal Drug-Free Workplace Program, all psychology trainees are subject to random drug testing throughout the entire VA appointment period. Trainees are asked to sign an acknowledgement form stating you are aware of this practice. The VA may also conduct routine background checks as an additional pre-employment requirement. Incorrect, incomplete, or falsified information may be grounds for dismissal. By applying for Fellowship, trainees are agreeing to these conditions, as well as authorizing release of information. They are also agreeing to abide by all policies and procedures of a federal workplace, should they accept a training position at the Durham VA Medical Center.

Self Disclosure: Consistent with the APA Code of Ethics (2010), see 7.04 below, our Durham VA Medical Center Psychology Training Program does not require interns to disclose personal information in the context of their training, unless the supervisor feels that such personal information is needed in order to evaluate or obtain assistance for a trainee whose personal problems are preventing them from performing professional activities competently or whose problems are posing a threat to the trainee or others.

7.04 Psychologists do not require students or supervisees to disclose personal information in course- or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses or significant others except if (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing

their training- or professionally related activities in a competent manner or posing a threat to the students or others.

Our privacy policy is clear: we will collect no personal information about you when you visit our website.

REQUIREMENTS FOR COMPLETION

Fellows are provided with performance criteria for each rotation and an evaluation form that reflects the expectations regarding professional competencies a fellow should be attaining. In addition to completion of the 2080-hour training experience, interns must achieve competency ratings equivalent to “Intermediate to Advanced” in all competency areas of the rotations completed, although higher (e.g., “Advanced”) level ratings are typical of Durham Fellows.

In addition to developing professional health service competencies, maintaining good standing within the program also necessitates certain levels of professional behavior. Veterans and staff shall be treated with dignity and respect. The APA ethical guidelines and HIPAA regulations will be strictly adhered to, especially in matters of confidentiality of information, non-exploitation of patients and avoiding conflicts of interests. Additionally, interns are responsible for conforming to all other Medical Center and Office of Personnel Management regulations concerning conduct and behavior.

APPLYING FOR FELLOWSHIP

Application Deadline:

The application deadline is January 5, 2023 (11:59pm, Eastern); however, early submissions are strongly encouraged.

Eligibility:

Currently, consistent with the requirements detailed in the following <http://www.psychologytraining.va.gov/eligibility.asp>, applicants must meet the following prerequisites for our postdoctoral Fellowship program:

1. Must be U.S. citizens
2. Must have completed requirements for their doctorate in clinical or counseling psychology from an APA- accredited program by the start date of the Fellowship and must have completed an APA-accredited clinical internship (or a newly created VA internship which is pursuing accreditation).
3. If born male, applicants born after 12/31/1959 must have registered for the draft by page 26.
4. Those selected are required to meet the essential functions (physical and mental) of the training program and immunized following current Center for Disease Control (CDC) guidelines and VHA policy for healthcare workers to protect themselves, other employees and patients while working in a healthcare facility. This includes proof of COVID-19 vaccination if an applicant does not meet criteria for a religious or medical exemption. Selected applicants must verify they have satisfactory health to perform the duties of the clinical training program, a recent TB screen, and Hepatitis B vaccination or signed declination waivers.
5. Matched postdoctoral Fellows are subject to fingerprinting, background checks and
6. are subject to random drug testing. HPTs must sign a Random Drug Testing Notification and Acknowledgement Memo prior to the start of fellowship. The VA will initiate termination dismissal from VA training programs against any trainee who is found to use illegal drugs on the basis of a verified positive drug test (even if a drug is legal in the state where training takes place) or refuses to get drug test.

Training Term: This is a one-year (i.e., 12 month), full-time (i.e., 40 hours per week) training experience. The Fellowship year begins on August 14, 2023, and ends on August 9, 2024. We are unable to accommodate requests to start the Fellowship prior to August 14th but in rare instances, we may be able to accommodate a very short delay in your start date due with approval of the training committee.

Positions Available:

The 2023-2024 Fellowship class will be comprised of 8 Fellows (total):

- **Trauma Recovery Program & OOO Mental Health:** 2 positions
- **Women's Health -Trauma & DBT:** 1 position
- **Primary Care Mental Health Integration/Behavioral Medicine (PCMHI/BMed):** 2 positions
- **Psychosocial Rehabilitation (PSR):** 2 positions
- **Geropsychology:** 1 position

Stipend: The current stipend is \$48,148 plus benefits. The stipend is typically adjusted yearly, and we will update these materials as needed.

Benefits: Health Insurance, all 11 Federal Holidays (which may include additional unscheduled Holiday leave), 13 days paid vacation and up to 13 days of sick leave. Up to 7 days of authorized absence will be granted for educational opportunities (outside workshops, conferences, conventions) or other professional development activities. VA Psychology trainees may qualify for the childcare subsidy program if the family income is less than \$140,000. More information can be found here: [VA Child Care Subsidy Program - Office of the Chief Human Capital Officer \(OCHCO\)](#) (Forms are located here)

Licensure: Fellows are registered with the North Carolina Board of Psychology as Postdoctoral Fellows and the program meets the North Carolina Board of Psychology's licensure requirements which requires 1500 clinical hours as well as 12 months of active practice.

Liability Protection for Trainees:

When providing professional services at a VA healthcare facility, VA sponsored trainees acting within the scope of their educational programs are protected from personal liability under the Federal Employees Liability Reform and Tort Compensation Act 28, U.S.C.2679 (b)-(d).

Application Procedures:

To apply, the following are required:

1. **Cover Letter that indicates** (a) the focus areas or emphasis area(s) to which you are applying, (b) a brief summary of your professional interests, relevant educational, clinical and research experiences relevant to the specific area(s) of interest, (c) your experience with diversity/multiculturalism, and (d) your training and career goals.
2. **Current curriculum vita.** Please include the following: projected internship completion date, dissertation status, training hours from your graduate school and your internship to date. You may also include a section of projected hours and experiences for the remainder of your internship.
3. **Transcripts from graduate school.** For the application, a scanned photocopy will suffice. However, if you are accepted into the Fellowship Program, the VA will ask you to provide an official school copy.
4. **Three letters of recommendation from supervisors** who are knowledgeable of your competency in the following areas: Integration of science and practice, individual and cultural diversity, ethical and legal matters, professional attitudes/values/behaviors, interpersonal and communication skills, intervention, and assessment skills, interprofessional and consultation skills, and your knowledge of the focus area relevant to your application. We encourage you to share with them the areas of competence upon which we are making our evaluations. Letter writers should upload an electronic copy to the APPA CAS system, and this will be considered an official "signed" copy. We encourage letter writers to submit documents as Microsoft Word or Adobe Acrobat files.
5. **A letter of support from your internship training director,** affirming your successful progress in your internship and anticipated completion date of internship. If your internship training director is also one of the supervisors who will be providing a letter of reference letter for you, one letter will suffice. This letter **MUST** be uploaded into APPA-CAS.

6. If you have not completed your dissertation, **you will also need to include a letter from your dissertation or program chair** that includes a description of your progress toward completion of the doctoral degree and anticipated date.
7. Please note that **you may apply to more than one focus area or more than one emphasis area. In this case**, you will only need to submit only one application. If you are considering applying to three or more focus areas within the Clinical Program, please be in touch with Dr. Clancy prior to the application deadline.

Applications should be **submitted online via APPA-CAS by January 5, 2023** (11:59pm, Eastern); however, early submissions are strongly encouraged. APPIC's centralized postdoctoral application system (APPA-CAS) may be found at the following address: <https://appicpostdoc.liaisoncas.com/applicant-ux/#/login>. If applying via APPA-CAS results in a financial hardship, please reach out to the training director to discuss alternative options.

Selection Process:

Completed applications will be reviewed by the supervisors in each of the pertinent focus areas. We are interested in applicants with strong academic backgrounds and sound clinical and scientific knowledge who value evidence-based practice. We also value applicants with strong interpersonal skills, which are necessary to function as part of a large medical center. Although not a VA requirement, prior experience (e.g., as a VA practicum student or intern) within Department of Veterans Affairs (VHA) programs is generally advantageous – and increases the goodness of fit with our training programs.

We are committed to ensuring a range of diversity among our training classes and we select candidates representing different kinds of programs, geographical areas, ages, racial and ethnic backgrounds, sexual orientation, disabilities, culture, and life experiences. We strongly encourage applications for applicants who identify themselves as Veterans or members of a historically underrepresented groups on the basis of racial or ethnic status; as representing diversity on the basis of sexual orientation; or as representing diversity on the basis of disability status. The program also values applicants who have experience and skills in the domains of diversity knowledge, awareness, and sensitivity.

Following receipt and review of the application materials, a select number of applicants will be invited to interview. Given the ongoing COVID-19 pandemic, all interviews will be conducted by videoconference (e.g., Webex, TEAMS, Zoom).

Interview Dates:

Fellowship interview dates are currently planned for February 3 and 6, 2023. We will adhere to APPIC Postdoctoral Selection Standards for making Fellowship offers and therefore we will make offers following the completion of interviews; applicants can then accept, decline, or hold an offer until the designated Common Hold Date (CHD) which is Monday, February 27, 2023. Please see the **APPIC postdoctoral selection standards** here: [Postdoctoral Selection Standards \(appic.org\)](https://www.appic.org/standards)

Contacting the Durham VAMC Psychology Fellowship Program

General inquiries regarding the Durham VAMC Postdoctoral Fellowship program should be addressed to the Director of Training:

Carolina Clancy, Ph.D., ABPP

Training Director, Postdoctoral Fellowship Program

Email: carolina.clancy@va.gov (preferred)

Telephone: 919.286-0411 x177061

FELLOWSHIP TRAINING STAFF

Leadership

Carolina P. Clancy, Ph.D., ABPP-Clinical, (she/her/hers)

Education: University of North Carolina at Greensboro, 2003

VA Duties: Training Director, Durham VAHCS Psychology Fellowship Training program; Staff Psychologist, Posttraumatic Stress Disorder (PTSD) Program; Local Evidence Based Psychotherapy Coordinator; VISN 6 Regional CPT Trainer and Consultant.

Special Interests: Training, education, and consultation, assessment and treatment of PTSD and related conditions, and evidence-based psychotherapies for PTSD.

Email: carolina.clancy@va.gov

Core Faculty

C. Sloan Alday, Ph.D., (she/her/hers)

Education: Auburn University, 1997

VA Duties: Staff Psychologist, Psychosocial Rehabilitation and Recovery Center and Mental Health Intensive Case Management

Special interests: Serious mental illness, psychosocial rehabilitation

Email: caroline.alday@va.gov

Kate Berlin, Ph.D., ABPP-Clinical, (she/her/hers)

Education: Vanderbilt University, 2008

VA Duties: Staff Psychologist, PTSD Clinic & Substance Use Disorder Outpatient Clinic; VA National Prolonged Exposure Trainer and Consultant.

Special Interests: Women's health, military sexual trauma, complex PTSD, PTSD/substance abuse comorbidity.

Email: kate.berlin@va.gov

Sara Boeding, Ph.D., (she/her/hers)

Education: University of North Carolina at Chapel Hill, 2013

VA Duties: Staff Psychologist, OEF/OIF Clinic; Assistant Division Chief, Specialty Mental Health.

Special Interests: Evidence Based Psychotherapies for PTSD, Couples Therapy, complex PTSD, DBT.

Email: sara.boeding@va.gov

Jason E. Bonner, Ph.D., (he/him/his)

Education: University of Louisville, 2010

VA Duties: Staff Psychologist, Primary Care-Mental Health Integration; Consultant for national VA Pharmacy Residency Program Office; Consultant for the VA Evidence Based Psychotherapy CBT for Insomnia national program.

Special Interests: Management of co-occurring medical and psychological disorders, behavioral sleep medicine, social-cognitive factors in lifestyle behavior change, stress/burnout/resilience in clinical pharmacy residency training, and integrated models of healthcare delivery.

Email: jason.bonner@va.gov

Julia Browne, Ph.D., (she/her/hers)

Education: Ph.D. in Clinical Psychology. University of North Carolina at Chapel Hill, 2019.

VA Duties: PRRC supervisor, research fellow for PSR fellows.

Special Interests: Severe mental illness, premature mortality in patients with severe mental illness; education, research, teaching and training.

Email: julia.browne@va.gov

Kelly Caron, Ph.D., (she/her/hers)

Education: Florida State University, 2011

VA Duties: Staff Psychologist & Clinic Director, Women's Health – Mental Health Clinic; Chair, Interdisciplinary Transgender Care Team; Consultant, Prolonged Exposure Dissemination Program.

Special Interests: Evidence-Based Psychotherapies for PTSD and complex trauma presentations, Dialectical Behavior Therapy, Military Sexual Trauma, LGBTQI-affirming care.

Email: kelly.caron@va.gov

Ashlee C. Carter, Ph.D., (she/her/hers)

Education: University of South Florida, 2010

VA Duties: Staff Psychologist, Primary Care Mental Health Integration, and PCMH Focus Area Coordinator.

Special Interests: Telemental Health, Comorbid MH and SUD disorders, health psychology, chronic pain.

Email: ashlee.carter@va.gov

Natalie J. Cross, Ph.D., (she/her/hers)

Education: University of Florida, 2009

VA Duties: Staff Psychologist, Behavioral Sleep Medicine Clinic

Special Interests: Health Psychology, mindfulness meditation, CBT-Insomnia & PAP adherence, motivational interviewing, substance use disorders

Email: Natalie.Cross@va.gov

Eric Dedert, Ph.D., (he/him/his)

Education: University of Louisville, 2007

VA Duties: Staff Psychologist, Posttraumatic Stress Disorder Program; Data Analyst, National Evidence-Based Psychotherapy Program.

Faculty Appointment: Instructor, Department of Psychiatry and Behavioral Sciences, Duke University Medical Center.

Special Interests: Posttraumatic stress disorder, smoking cessation, alcohol use disorders, comorbidity, implementation of evidence-based psychotherapies.

Email: eric.dedert@va.gov

Jenna K. Ellison, Ph.D., (she/her/hers)

Education: Southern Methodist University, 2018

VA duties: Staff Psychologist, Primary Care Mental Health Integration

Special Interests: Health psychology/Behavioral Medicine, weight management, chronic pain, behavioral sleep medicine, and program development

Email: jenna.ellison@va.gov

Danielle A. Gagne, Ph.D., (she/her/hers)

Education: Saint Louis University, 2016

VA duties: Staff Psychologist, Behavioral Medicine Clinic

Special Interests: Health psychology/Behavioral Medicine, chronic pain, weight management, and program development.

Email: danielle.gagne@va.gov

Cindy D. Greenlee, Ph.D., (she/her/hers)

Education: Duke University, 2009

VA Duties: Chief of Behavioral Medicine Division and Primary Care-Mental Health Integration (PCMHI) Clinic Coordinator.

Special Interests: PCMHI, Behavioral Medicine, Health Psychology.

Email: cindy.greenlee@va.gov

Jeffrey "Jay" Gregg, Ph.D., (he/him/his)

Education: West Virginia University, 2014

VA Duties: Staff Psychologist, Trauma Recovery Program and Returning Veteran's Clinic; Durham VA Psychology Internship Training Director, Adjunct Assistant Professor, Duke University Department of Medicine.

Special Interests: Assessment and treatment of posttraumatic stress, depression, hopelessness, and suicidality across the lifespan; Clinical geropsychology; Contextual behavioral science.

Email: jeffrey.gregg2@va.gov

Rachel Hibberd, Ph.D., *(she/her/hers)*

Education: University of Missouri-St. Louis, 2013

VA Duties: Staff Psychologist, PTSD Clinic, SUD Clinic, and DBT Program.

Special Interests: Contextual behavioral therapies (ACT and DBT), PTSD, SUD, treatment of complex trauma sequelae, and moral injury.

Email: rachel.hibberd@va.gov

Brandon Irvin, Ph.D., *(he/him/his)*

Education: University of North Carolina at Chapel Hill, 2012

VA Duties: Staff psychologist, DVAMC General Mental Health Clinic.

Special interests: Acute mental health, positive psychology, assessment, general mental health, and brief psychotherapy.

Email: Robert.Irvin@va.gov

Jessica A. E. Kinsaul, Ph.D., *(she/her/hers)*

Education: Louisiana State University, 2015

VA Duties: staff psychologist, Women's Health – Mental Health Clinic

Special interests: Treatment of posttraumatic stress, military sexual trauma, women's health, eating disorders, and Dialectical Behavioral Therapy.

Email: Jessica.Kinsaul@va.gov

Saule Kulubekova, Ph.D., ABPP-CN, *(she/her/hers)*

Education: Emory University, 2012

VA Duties: Staff Psychologist, Neuropsychology Clinic.

Special Interests: Neuropsychology and health psychology.

Email: saule.kulubekova@va.gov

Melanie K. Leggett, Ph.D., D.B.S.M., FSBSM, (she/her/hers)

Education: University of Memphis, 2001

VA Duties: Staff Psychologist, Director, Behavioral Sleep Medicine Clinic, Consultant for the VA Evidence Based Psychotherapy CBT for Insomnia national program.

Faculty Appointment: Associate Professor, Department of Psychiatry and Behavioral Sciences, Duke University Medical Center.

Special Interests: Behavioral sleep medicine, adherence to treatment for sleep apnea, psychiatric factors, and treatment adherence in sleep apnea.

Email: melanie.leggett@va.gov

Craig D. Libman, Ph.D., (he/him/his)

Education: University of Akron, 2018

VA Duties: Staff psychologist, Palliative Care and Consult/Liaison Services

Special interests: Palliative care/end-of-life, clinical geropsychology, multicultural approaches to treatment and training, late-life depression/anxiety/PTSD, coping with life-limiting illness and chronic pain, and caregiver support.

Email: craig.libman2@va.gov

J. Murray McNiel, Ph.D., (he/him/his)

Education: University of North Carolina at Chapel Hill, 2007

VA Duties: Staff Psychologist, SUD Clinic; Smoking Cessation Lead Clinician; Co-Director, PSR Fellowship; Consultant, CBT-SUD training program within VA initiative for EBP dissemination (currently inactive).

Special Interests: Evidence-based treatment of SUD; tobacco cessation treatment.

Email: jesse.mcniel@va.gov

Lotus M. Meshreki, Ph.D., (she/her/hers)

Education: University of Rhode Island, 2007

VA Duties: Staff Psychologist, OEF/OIF/OND Clinic

Special Interests: Evidence Based Treatments for PTSD, ACT, and CBT-I.

Email: lotus.meshreki@va.gov

Lauren K. Osborne, Ph.D., (she/her/hers)

Education: University of Southern Mississippi, 2016

VA Duties: Staff Psychologist, Women's Health – Mental Health Clinic

Special interests: Treatment of posttraumatic stress, military sexual trauma, women's health, Acceptance and Commitment Therapy, Mindfulness

Email: lauren.osborne@va.gov

Erin Piechocinski, PsyD (she/her/hers)

Education: Illinois School of Professional Psychology, 2015

VA Duties: Staff psychologist, CLC/Hospice and Home-Based Primary Care

Special Interests: Clinical geropsychology, late-life depression/anxiety/PTSD, coping with life-limiting illness and chronic pain, caregiver support, dementia and factors contributing to successful aging.

Email: erin.piechocinski@va.gov

Rachel L. Rodriguez, Ph.D., M.P.H., ABPP-Gero, (she/her/hers)

Education: University of Alabama, 2006

VA Duties: Geropsychology Focus Area Coordinator; Staff Psychologist, Home Based Primary Care Program; Program Manager- Geriatric Scholars Program – Psychology

Special Interests: Factors contributing to successful aging, coping with chronic illness, dementia, palliative care/end-of-life, public health policy and aging, and Geropsychology training and supervision.

Email: rachel.rodriguez2@va.gov

Rachel Ruffin, Ph.D., (she/her/hers)

Education: University of Miami, 2011

VA Duties: Staff Psychologist & PTSD Clinic Director, Posttraumatic Stress Disorder Clinical Team.

Special Interests: Evidence Based Treatments for PTSD, comorbid PTSD and chronic illness, Behavioral Medicine/Chronic Pain.

Email: rachel.ruffin@va.gov

Raha Forooz Sabet, Ph.D., (she/her/hers)

Education: University of Miami, 2019

Pronouns: She/her/hers

VA Duties: Staff Psychologist, Primary Care Mental Health Integration. Member of Antiracism and Black Equity Advisory Board.

Special Interests: Health promotion, health equity, behavioral medicine, and mindfulness.

Email: raha.sabet@va.gov

Brea Salib, Ph.D., (she/her/hers)

Education: University of North Carolina at Chapel Hill, 2008

VA Duties: Staff Psychologist, Community Living Center & Home-Based Primary Care program.

Special Interests: Geropsychology, non-pharmacological approaches to managing challenging dementia-related behaviors (STAR-VA program), cognitive assessment, capacity, and end-of-life issues.

Email: brea.salib@va.gov

Anne Steel, Ph.D., *(she/her/hers)*

Education: University of Nebraska-Lincoln, 2018

VA Duties: Staff Psychologist, Trauma Recovery Program

Special interests: Assessment and treatment of PTSD, Dialectical Behavioral Therapy, couples therapy, measurement-based care.

Email: anne.steel@va.gov

Christi S. Ulmer, Ph.D., C.B.S.M., *(she/her/hers)*

Education: University of Louisville, 2006

VA Duties: Staff Psychologist, Behavioral Sleep Medicine Clinic; Clinical Research Psychologist, Health Services Research and Development.

Faculty Appointment: Assistant Professor, Department of Psychiatry and Behavioral Sciences, Duke University Medical Center.

Special Interests: Increasing Veteran access to Behavioral Sleep Medicine, research on the adverse health consequences of sleep disorders, and sleep disturbance among those with PTSD.

Email: christi.ulmer@va.gov

Adjunct Faculty

Seamus Bhatt-Mackin, MD, FAPA, CGP, *(he/him/his)*

Education: Northwestern University School of Medicine, 2004

VA Duties: Staff psychiatrist within the OEF/OIF/OND Clinic at DVAMC. Associate Program Director for the Duke General Psychiatry Residency Program.

Special Interests: group psychotherapy work with particular interest in consultation groups and psychotherapy groups, PTSD psychotherapy, and clinical education.

Email: Seamus.Bhatt-Mackin@va.gov

Kirsten Dillon, Ph.D., *(she/her/his)*

Education: Florida State University, 2015

VA Duties: Staff Psychologist, Posttraumatic Stress Disorder Program; Psychologist, Research and Development Service

Faculty Appointment: Clinical Associate, Department of Psychiatry and Behavioral Services, Duke University Medical Center.

Special Interests: PTSD, anger, suicide, mobile health, implementation of evidence-based psychotherapy.

Email: kristin.dillon@va.gov

Nathan A. Kimbrel, Ph.D., *(he/him/his)*

Education: University of North Carolina at Greensboro, 2009

VA Duties: Staff psychologist at the DVAMC, Assistant Director for Dissemination and Implementation Research within the VISN 6 Mid-Atlantic MIRECC, and Assistant Professor in the Department of Psychiatry and Behavioral Sciences at DUMC.

Special Interests: Etiology, assessment, and treatment of PTSD, depression, suicidal behavior, and NSSI in Veterans, including genetic and epigenetic contributions. Dr. Kimbrel has an active research program and is currently funded by the DVA to study gene x environment effects on PTSD.

Email: Nathan.Kimbrel@va.gov

Sara Tiegreen, Ph.D., *(she/her/hers)*

Education: University of Tulsa, 2009

VA Duties: Assistant Division Chief, Outpatient Mental Health/BHIP; Staff Psychologist, Raleigh II Mental Health Clinic; Cognitive Processing Therapy Trainer and Consultant.

Special Interests: Evidence- Based Psychotherapies, trauma, CPT, training.

Email: sara.tiegreen@va.gov

There are additional staff available to provide diversity mentorship, professional mentorship as well as research mentorship/collaboration. If you are interested in receiving more details about additional staff, please reach out to the training director by emailing carolina.clancy@va.gov

THE SETTING

Location: The Durham VA Medical Center is located in the heart of the Bull City (Durham, NC) and sits adjacent to the Duke University Medical Center and Duke University campuses. Durham is a richly diverse city, home to a greater makeup of ethnic minority groups than any of the five largest cities in North Carolina. Durham is also home to a large and thriving [LGBTQ+](#) community, and was named the [Most Tolerant City in the US](#) in 2012 by The Daily Beast. The Triangle region, comprised of Durham, Raleigh, and Chapel Hill, is situated halfway between the Blue Ridge Mountains and the beautiful beaches of North Carolina's Outer Banks. Travel to the region is facilitated by a number of major highways, bus and rail lines ([Durham Station](#)), and international airports ([RDU](#), [CLT](#), [PTI](#)) allowing for easy access to and from other metropolitan areas or international destinations. Cultural, historical, educational, and natural amenities abound, and Durham has gained notoriety as a one of the best places to live, work, and play. Durham offers the sophistication of an urban setting, while retaining its small town charm and history. It is full of [funky cafés, rich music history, and local artisans and restaurants](#). Many of the local restaurants and shops in Durham offer [Living Wages](#) to their employees and value [sustainability](#). There is also a strong community-focused orientation. For example, [Ninth Street Bakery](#) has been providing free meals to those facing food insecurity since the pandemic began. You will also find that the shops around here support each other—"buy local" is definitely something this community values!

Why you'll love Durham: The secret is out! Durham was rated:

- #1 [Best Place to Live in North Carolina](#) by US News and World Report in 2021
- #1 Metro with the [Lowest Jobs-Housing Imbalance](#) by the Manhattan Institute in 2021
- #2 [Best Places to Live in the US](#) by US News and World Report in 2021
- 7th [Best-Run City](#) in America by WalletHub in 2021
- 8th Top City [where Black Americans fare best economically](#) by Smart Asset in 2021
- 11th [Best City to launch your career](#) in 2021 by LinkedIn

More broadly, in 2021, North Carolina has been rated the [#1 State in the US for number of teachers nationally board certified](#), #3 [Best State for Higher Education](#), #3 [Best State to Drive](#), #6 State [where Millennials are moving](#), and #10 [Best State for LGBTQ Job Seekers](#).

Despite the vast growth and national praise in recent years, the Triangle has maintained an affordable cost of living, and rivals larger metropolises with its rich heritage, cultural diversity, and urban setting. The Raleigh/Durham metro area, which includes the famed [Research Triangle Park](#), is a booming area for young professionals. The area is anchored by three major research

universities (Duke University, University of North Carolina – Chapel Hill, North Carolina State University), and North Carolina is among the nation's states with the most (HBCUs). The Triangle alone boasts three Historically Black Colleges and Universities (HBCUs) – North Carolina Central University, Fayetteville State University, and Shaw University! Both the state and Triangle region have scored [numerous top rankings](#) from national media outlet annual reviews. The region is also home to a multitude of performing arts venues, including [Carolina Performing Arts](#), the [Duke Energy Center for the Performing Arts](#), [Walnut Creek Amphitheatre](#), the historic [Carolina Theatre of Durham](#), and the award-winning Durham Performing Arts Center ([DPAC](#)), which offer a diverse and exciting lineup of events.



Durham has also received national praise for its [local food scene](#), and was featured in the New York Time's (NYT) [36 Hours Series](#). Durham has been coined [The South's Tastiest Town](#) by Southern Living Magazine, and is home to a long and growing list of local restaurants, cafes, bakeries, and farmer's markets. The NYT has also featured neighboring Chapel Hill, NC and Carrboro, NC in its 36 Hours series ([here](#)), highlighting the expanse of the rich local food culture scene. Best of all, with Durham's affordable cost of living ([calculator](#)), residents can readily enjoy the local offerings.

In addition to the urban scene, the Triangle offers a rich variety of options for [outdoor activities](#) and is home to many state and regional parks (e.g., [Eno River State Park](#), [Mountains to Sea Trail](#), [Umstead State Park](#)). Plus, the Triangle has [27 off-leash dog parks](#)! For the adventurous and competitive spirit, the region offers rich running ([run](#)), cycling ([ride](#)), triathlon ([Tri](#)) communities, and golfing ([golf](#)), with something for everyone ([NC Sports](#))! The most enthusiastic spectator will also be right at home, with access to professional ([NFL](#), [NHL](#), [NBA](#)), minor league baseball ([Durham Bulls](#), [DBAP](#)), and nationally renowned men's and women's champion collegiate teams ([Duke](#), [UNC-CH](#), [NCSU](#)).

For family adventures, you could try out something different every weekend of the year; however, it's likely you'll fall in love with some places that become staples on the calendar. The Triangle area offers museums ([Marbles Kids Museum in Raleigh](#), [Museum of Life and Science in Durham](#), [North Carolina Museum of Natural Sciences](#)), unique classes and camps ([Notasium](#), [Ninth Street Dance](#), [NC Kids Yoga](#), [Camp High Hopes in Durham](#)), as well as festivals, parades, and parks ([Fuquay-Varina Splash Park](#), [Pullen Park in Raleigh](#)) that are fun

for all ages. [North Carolina Zoo in Asheboro](#), [Hanging Rock State Park in Danbury](#), or [Carowinds](#) in Charlotte make great day trips! For younger children, the Triangle offers a variety of [childcare facilities](#) with varying curricula and philosophies (e.g., montessori, faith-based).



Where to Live: With the college town atmosphere of Chapel Hill, the vibrant Durham neighborhoods, and the metropolitan feel of Raleigh, a wide variety of affordable housing options are readily available. Past trainees have chosen homes in cozy older neighborhoods, modern lofts in refurbished warehouses, and contemporary complexes and developments. Durham, Chapel Hill, and Raleigh are all within easy access to the Medical Center, and each city has its own unique personality and resources to consider.. Here are a few sites you may find helpful when reviewing local rental options: [The Chronicle \(www.nearduke.com/housing\)](#), [www.durhamrent.com](#), or [www.rentals.com](#). There are a number of well-established neighborhoods nearby, and current staff are happy to provide some guidance once you begin your housing search.

Public transportation options abound, with each city boasting a regional bus system, as well as the multi-city Triangle Transit. Additionally, many past Fellows have chosen to live within walking or biking distance of the medical center.



For the prospective Fellows considering relocation of their families, including children, the Durham area offers a wide array of family-friendly activities and settings, high quality schools, and a sense of safety and community all without sacrificing the convenience and excitement of a nearby metropolitan area that young professionals typically appreciate.

FELLOWSHIP ADMISSIONS, SUPPORT, AND INITIAL PLACEMENT DATA

Postdoctoral Residency Admissions, Support, and Initial Placement Data

Date Program Tables are updated: 9/1/2022

Program Disclosures

Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution's affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, provide website link (or content from brochure) where this specific information is presented:	

Postdoctoral Program Admissions

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:

Overview: The Durham VAMC Clinical Psychology Postdoctoral Fellowship Program seeks applicants with well-developed professional skills in empirically supported interventions, assessment, and research (as well as program evaluation, systems research, and other scholarly endeavors). Our program offers on-site opportunities to pursue training and experience in a variety of evidence-based psychotherapies, particularly in cognitive-behavioral methods and interventions. We are especially eager to recruit postdoctoral fellows from scientist-practitioner graduate programs that provide strong scientific training – and we welcome candidates from PCSAS-accredited clinical science programs.

Prior experience (e.g., as a VA practicum student or intern) within Department of Veterans Affairs (VHA) psychology training programs has generally proved to be advantageous to our fellowship program's candidates – and increases the goodness of fit with our training programs. However, this is not a requirement; and applicants whose graduate training has provided strong scientific and clinical training (and who believe that our program's offerings will meet their training and professional development needs) are encouraged to apply. Although relatively less common, such candidates without prior VA experience have been successful in our fellowship program. The Durham VA Health Care System is an Equal Opportunity Employer; and our veteran population is quite diverse. Our postdoctoral fellowship program is committed to ensuring a range of diversity among our training classes, and we seek candidates representing diverse racial and ethnic backgrounds, sexual orientation, and disabilities. We encourage applications from minority candidates and those who may constitute members of historically underrepresented groups, whether based on racial or ethnic status; sexual identity or orientation; or disability status. For this reason, we encourage candidates to consider self-identifying these aspects of background and identity in application materials.

Describe any other required minimum criteria used to screen applicants:

Applicants must meet the following pre-requisites to be considered for a postdoctoral program in a VA setting:

- 1) Completion of doctoral degree, including defense of dissertation, from a clinical or counseling psychology doctoral programs accredited by the American Psychological Association (APA) or the Canadian Psychological Association (CPA). All the doctoral program's requirements must be completed before the start of the fellowship.
- 2) Completion of an APA or CPA accredited psychology internship program or have completed a VA-sponsored internship.
- 3) U.S. citizenship.
- 4) Selected postdoctoral residents are subject to fingerprinting, background checks, and a urine drug screen.
- 5) Male applicants born after 12/31/1959 must have registered for the draft by age 26

*** Failure to meet these qualifications might result in a rescinded offer to an applicant. See fellowship brochure for additional details***

Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Residents	\$48,148	
Annual Stipend/Salary for Half-time Residents	N/A	
Program provides access to medical insurance for resident?	Yes	No
If access to medical insurance is provided:		
Trainee contribution to cost required?	Yes	No
Coverage of family member(s) available?	Yes	No
Coverage of legally married partner available?	Yes	No
Coverage of domestic partner available?	Yes	No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	104	
Hours of Annual Paid Sick Leave	104	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes*	No
Other Benefits (please describe): -11 paid Federal Holidays -7 days of professional development leave (i.e., administrative leave) for licensure exams, workshops, conferences, or other professional development activities is available. * Extended leave (medical, maternity, etc.) that requires unpaid leave may be permitted with resulting extension of fellowship, to assure completion of the fellowship (52-week program).*		

*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table

Initial Post-Residency Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2018-2021	
Total # of residents who were in the 3 cohorts	23	
Total # of residents who remain in training in the residency program	0	
	PD	EP
Academic teaching	1	0
Community mental health center	0	0
Consortium	0	0
University Counseling Center	0	0
Hospital/Medical Center	2	1
Veterans Affairs Health Care System	14	17
Psychiatric facility	0	0
Correctional facility	0	0
Health maintenance organization	0	0
School district/system	0	0
Independent practice setting	4	4
Other (Military Health Center)	2	1

Note: “PD” = Post-doctoral residency position; “EP” = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.